

JUN 19 2006

PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0551-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional)</b> 01-3235	
In re Application of <b>Robert A. Blake, et al.</b>			
Application Number <b>10/694,649</b>		Filed <b>October 27, 2003</b>	
For <b>Apparatus and Method For Inspecting Grinding Wheels</b>			
Art Unit <b>2856</b>		Examiner <b>John C. Hanley</b>	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_

☒ Two months (37 CFR 1.17(a)(2)) \$ 450.00

☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_

☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_

☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed. 06/20/2006 TL0111 88888840 011000 18594649

☐ Payment by credit card. Form PTO-2038 is attached. 02 FC:1252 450.00 DA

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 01-1000.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/86).

☐ attorney or agent of record. Registration Number \_\_\_\_\_

☒ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 51,803

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

June 19, 2006  
Date

(724) 337-4728  
Telephone Number

Harry A. Hild, Jr.  
Signature

Harry A. Hild, Jr.  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.136(e). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-6199 and select option 2.

PAGE 4/5 \* RCVD AT 6/19/2006 4:02:41 PM [Eastern Daylight Time] \* SVR:USPTO-EFXXF-2/14 \* DNS:2738300 \* CSID:17243375959 \* DURATION (mm:ss):02:28

Adjustment date: 09/27/2006 CKHLOK  
06/20/2006 TL0111 00000040 011000 10694649  
02 FC:1252 450.00 CR

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: <u>09/27/06</u>		2 Serial/Patent # <u>10/694,649</u>										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
<input checked="" type="checkbox"/>	Extension of Time		06/19/06	\$ 450.00								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
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	Cert of Correction/Terminal Disc.			\$								
	Maintenance			\$								
	Assignment			\$								
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			7 TOTAL AMOUNT OF REFUND		\$ 450.00							
			8 TO BE REFUNDED BY:									
10 REASON:			Treasury Check									
	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:									
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<input checked="" type="checkbox"/>	No Fee Due (Explanation):											
The extension of time period is over, no extension fee is due.												
11 REFUND REQUESTED BY:												
TYPED/PRINTED NAME: <u>Irvin Dingle</u>		TITLE: <u>Paralegal</u>										
SIGNATURE: <u><i>Irvin Dingle</i></u>		PHONE: <u>571-272-3210</u>										
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